

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>JB</i>	<i>12</i>	<i>10-01-01</i>
O.I.P.E. CLASSIFIER	<i>Tel</i>	<i>501147</i>	<i>10/23/01</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) ... Canceled
 + Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim		Date	
Final	Original		
1	27	2/6/8	
2	41	2/28/9	
3	0202	02/03/04	
4	✓	✓	✓
5	✓	✓	✓
6	✓	✓	✓
7	✓	✓	✓
8	✓	✓	✓
9	✓	✓	✓
10	✓	✓	✓
11	✓	✓	✓
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Claim		Date	
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Claim		Date	
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If more than 150 claims or 10 actions
 additional sheet here

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